

November 20, 2015

TO: Each Supervisor

FROM: Robin Kay, Ph.D.

Acting Director

SUBJECT: REPORT BACK ON COLLECTION OF STANDARDIZED URGENT

CARE CENTER DATA (ITEM NO. 34, AGENDA OF APRIL 28, 2015)

INTRODUCTION

On April 28, 2015, your Board approved a motion by Supervisor Mark Ridley-Thomas regarding mental health Urgent Care Centers (UCCs). The motion directed the Chief Executive Officer and the Directors of the Department of Mental Health (DMH) and Department of Health Services (DHS) to collect standardized data across the County psychiatric urgent care centers on a monthly basis. The motion also directed the CEO to report back to the Board of Supervisors with the proposed report format for review and approval. On July 15, 2015, DMH provided the first response to the motion, detailing the information to be provided in monthly reports. This memorandum will provide you with information regarding the following four current mental health UCCs:

- Exodus Eastside UCC
- Exodus Foundation MLK UCC
- DMH-DHS Olive View UCC
- Telecare MHUCC

OVERVIEW

Mental health UCCs provide intensive crisis services to individuals who otherwise would be taken to psychiatric emergency rooms. Individuals served include repetitive and high utilizers of emergency and inpatient services, individuals with co-occurring substance abuse and mental health issues, mentally ill individuals needing medication management, and individuals whose presenting mental health issues can be met with short-term (under 23 hours) immediate care and linkage to community-based treatment. The UCCs focus on quickly providing stabilization services and linking clients to ongoing community services and supports. The goal of mental health UCCs is to reduce the incidence of unnecessary and lengthy involuntary inpatient treatment while promoting care in voluntary, recovery-oriented treatment settings.

Mental Health UCCs currently differ in several ways.

- Two of the UCCs (Exodus Eastside UCC and Exodus Foundation MLK UCC) are fully implemented and are providing Lanterman-Petris-Short (LPS) designated services 24 hours per day, 7 days per week.
- The DMH-DHS Olive View UCC has expanded its hours to 24 hours per day, 7 days per week and was LPS designated on September 18, 2015. The program was fully implemented on September 21, 2015.
- The Telecare UCC provides a limited set of services, largely focused on streamlined access to medication support.

This report provides information regarding services delivered in UCCs during the month of September 2015. Information may change slightly over the coming months due to program delay in data entry.

SERVICES DELIVERED

Overall, 2,803 unique individuals were served by UCCs in the month of September. Some individuals received more than one visit; total visits to UCCs for that month was 3,181. Information for each UCC is as follows:

September 2015 Unique Clients Served and Visits to UCCs

Urgent Care Center	Unique Clients	Total Visits
DMH Olive View UCC	401	585
Exodus Eastside UCC	1,271	1,390
Exodus MLK UCC	943	1,005
Telecare MHUCC	188	201
Total	2,803	3,181

Average length of stay in LPS-designated UCCs reflects the time spent in a crisis stabilization service which includes psychiatric evaluation, medication monitoring, case management, and crisis intervention. During September 2015, average time spent in UCCs for the two programs providing crisis stabilization was:

Exodus Eastside UCC: 9.82 hours

Exodus Foundation MLK UCC: 10.15 hours

Referrals Into UCCs

While many individuals choose to walk into UCCs, a significant number of referrals are currently made by hospitals, health providers, and law enforcement. During September, the Exodus UCCs continued the pilot project in which law enforcement was encouraged to bring clients directly to UCCs in lieu of DHS Psychiatric Emergency Services. As a result of this pilot, and anticipated implementation of the jail diversion program, the referrals from law enforcement are expected to increase. The individuals served were referred as follows (Fig. 1):

Court/Probation/Law Enforcement: 406

Health Provider: 554

Inpatient Facility: 585 (hospital transfers)

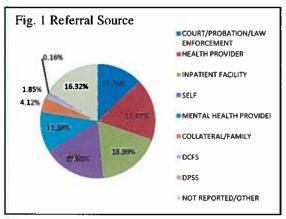
Self: 560

Mental Health Provider: 362

Collateral/Family: 131

DCFS: 59DPSS: 5

Not Reported/Other: 519



POPULATION SERVED

Age, Gender, Racial/Ethnic Composition

Of the total unique individuals served, the gender breakdown was as follows:

- 1,532 were male.
- 1,271 were female.

The age breakdown of the unique individuals served was as follows:

- 1,966 of the individuals served were between the ages of 26 and 59.
- 505 individuals served were between the ages of 18 and 25.
- 181 individuals served were between the ages of 13 and 17.
- 121 individuals served were aged 60 and over.
- 30 individuals served were identified in an "Other" age category.

The racial/ethnic breakdown of the individuals served was as follows (Fig. 2):

Hispanic: 1,107

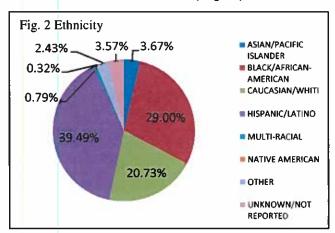
• Black/African-American: 813

Caucasian/White: 581Asian/Pacific Islander: 103

Native American: 9Multi-Racial: 22

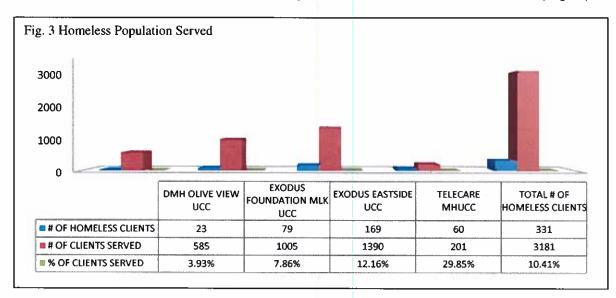
Other: 68

Unknown/Not Reported: 100



Homeless Status

331 (10.41%) of the individuals of the total population served were homeless. The number of homeless individuals served is provided for each UCC as follows (Fig. 3):



Legal Status

930 of the individuals served were conserved on 5150s.

Funding Status

Of the total unique individuals served:

- 2,113 individuals presented with medical insurance coverage.
 - 1,952 (69.64%) had Medi-Cal only.
 - 1 (0.04%) had Medi-Cal, Medicare, and Private insurance.
 - 5 (0.18%) had Medi-Cal and Private insurance.
 - 96 (3.42%) were Medi-Cal/Medicare.
 - 13 (0.46%) had Medicare only.
 - 4 (0.14%) had Medicare and Private insurance.
 - 42 (1.50%) had Private insurance only.
- 690 (24.62%) individuals were indigent.

OUTCOMES

Overall, the UCCs have demonstrated notable success in preventing admissions to higher levels of care. In September the number of countywide admissions to acute emergency rooms and psychiatric inpatient units within 30 days of a UCC visit was 233; 7.32% of all visits resulted in emergency room or hospital admission within 30 days of a UCC visit.

- DMH Olive View UCC: data not available*
- Exodus Eastside UCC: 137
- Exodus Foundation MLK UCC: 86
- Telecare MHUCC: 10

Further, clients seen in UCCs appear to be receiving services that help resolve the presenting crisis. In September the number of countywide re-admissions to UCCs within 30 days of a previous UCC visit was 324; approximately 10.19% of clients seen required a subsequent UCC visit within 30 days.

- DMH Olive View UCC: data not available*
- Exodus Eastside UCC: 185
- Exodus Foundation MLK UCC: 106
- Telecare MHUCC: 33

^{*} Information is unavailable due to fee for service data entry lag.

IN PROGRESS

 The Westside UCC, which closed when its lease expired last year, will reopen in December 2015. Data from the Westside UCC will be added once the program is fully operational in its new location.

BUDGET

The total gross annual budget for current UCCs is reflected in the chart below.

PROVIDER	ANNUAL BUDGET
DMH Olive View UCC	\$10,030,887.00
Exodus Eastside UCC	\$7,434,421.00
Exodus Foundation MLK UCC	\$6,733,087.00
Telecare MHUCC	\$1,853,779.00
Total Annual Budget	\$26,052,174.00

If you have questions or your staff would like further information regarding this report, please feel free to contact Robin Kay, Acting Director, at (213) 738-4108 or rkay@dmh.lacounty.gov.

RK:MM

c: Executive Office, Board of Supervisors Chief Executive Office Department of Health Services